



INSTRUCTIONS:

- 1. Completed applications must be sent by the TEACHER ONLY, using this form only. Make additional copies, as necessary.
- 2. Please verify all information for your student, including name spelling, before submitting. Type or print clearly.
- 3. Incomplete forms will be returned to teachers. Students will not be registered until forms have been completed and resubmitted.
- 4. Nonrefundable application fee: MTNA members \$25 per student; nonmembers \$40 per student.
- 5. Attach a single check from TEACHER ONLY (no checks from student or parents), payable to SBAMTA, for each mailing of application submitted.
- 6. Entries must be postmarked by February 1, 2025. Scheduling will be randomly generated by computer.
- 7. All teachers entering three or more students are required to assist the day of the competition (see below).
- 8. To receive Stickley Competition monetary awards, Winners are required to perform in, and Honorable Mentions are required to attend the Winners Recital on Sunday, March 2, 2025.
- 9. Mail to: Krysta Hawkley Hartman, 505 S Twykenham Dr., South Bend, IN 46615

| Student | | | Phone () | | |
|---|-----------------------|---|---------------------------------|---|--|
| Address | | | | | |
| Street | | City/State | | Zip | |
| Division | Grade | Age (as of 3/1/25) | School/City | | |
| Title of 1 st Piece (include Op. # & mvmt. # If applicable) | | Composer | Length (minutes) | | |
| Title of optional 2 nd Piece (include Op. # & mvmt. # If applicable) | | | Composer | Length (minutes) | |
| six consecutiv | ve months prior to | red for each student. If a stude March 1, 2025, the name of the am should that student win an | e previous teacher must be pr | eir current teacher for less than covided. Both teachers will be | |
| | | | Phone () | | |
| Circl | e one: Ms., Miss, M | Irs., Mr., Dr. | | | |
| Address | | | | | |
| | treet | | y/State | Zip | |
| e-mail | | Previous Teacher (if within 6 months) | | | |
| ***** | ****** | ********* | ********* | ********* | |
| | | Competition. Participating teach a substitute worker. Please indic | | | |
| If providing a | substitute worker, p | please submit name/contact info l | nere. | | |
| competition. | Failure to meet thi | the teacher, entrant and parent s responsibility will make the s | tudent ineligible to receive ar | | |
| By signin | g this application, t | y the applicant's parent during a lead the applicant and the applicant's py's College, and the local media. | | nd video to be taken for use of the | |
| Parent's Signa | nture | | Date | | |